

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective January 1, 2003

Application or Docket Number

09/810800

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

|   |               |              |
|---|---------------|--------------|
| TOTAL CLAIMS  |               |              |
| FOR   | NUMBER FILED  | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 13 minus 20 = |              |
| INDEPENDENT CLAIMS  | 1 minus 3 =   |              |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |               |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

|             |   |    |                                    |               |
|-------------|---|----|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT  |    | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | 13 | Minus                              | 20            |
|             | Independent   | 1  | Minus                              | 3             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |    |                                    |               |

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

|           |       |    |           |       |
|-----------|-------|----|-----------|-------|
| RATE      | FEE   |    | RATE      | FEE   |
| BASIC FEE | \$375 | OR | BASIC FEE | \$750 |
| X\$ 9=    |       | OR | X\$18=    |       |
| X42=      |       | OR | X84=      |       |
| +140=     |       | OR | +280=     |       |
| TOTAL     | 375   | OR | TOTAL     |       |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
| X\$ 9=           |                | OR | X\$18=           |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
| X\$ 9=           |                | OR | X\$18=           |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
| X\$ 9=           |                | OR | X\$18=           |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|             |   |    |                                    |               |
|-------------|---|----|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT  |    | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | 11 | Minus                              | 20            |
|             | Independent   | 2  | Minus                              | 3             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |    |                                    |               |

|             |   |    |                                    |               |
|-------------|---|----|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT  |    | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | 13 | Minus                              | 20            |
|             | Independent   | 3  | Minus                              | 3             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |    |                                    |               |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 -- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
 -- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
 The "Highest Number Previously Paid For" (Total & Independent) is the highest number found in the appropriate box in column 1.